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Supplemental Application Data Sheet

Application Information

Application number:: 10/544,093
Filing Date:: August 1, 2005
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R??::
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: Active Immunization to Generate Antibodies to
Attorney Docket Number:: 15270J-009820US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets::
Small Entity?:: No
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Ted
Middle Name::
Family Name:: Yednock
Name Suffix::
City of Residence:: Forest Knolls
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 184 Arroyo Road
City of Mailing Address:: Forest Knolls
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94933

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Nicki
Middle Name::
Family Name:: Vasquez
Name Suffix::
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 310 Sanchez Street
City of Mailing Address:: San Francisco
State or Province of mailing address:: CA

Country of mailing address:: US
Postal or Zip Code of mailing address:: 94114

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FR
Status:: Full Capacity
Given Name:: Frederique
Middle Name::
Family Name:: Bard
Name Suffix::
City of Residence:: Pacifica
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1111 Park Pacifica Avenue
City of Mailing Address:: Pacifica
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94044

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Peter
Middle Name:: A.
Family Name:: Seubert
Name Suffix::
City of Residence:: South San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 222 Northwood Drive
City of Mailing Address:: South San Francisco

State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94080

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Date::
This Application <u>PCT/U2004/002865</u>	National Stage of Application claiming benefit under 35 USC 119(e)	PCT/US2004/02865 <u>60/444,150</u>	01/31/2004 02/012003
<u>PCT/U2004/02865</u>	<u>Application claiming benefit under 35 USC 119(e)</u>	<u>60/444,150</u>	<u>02/012003</u>